

APPLICATION DATA SHEET

Application Information

Application Number::

Filing Date:: September 5, 2003

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

**Computer Readable Form
(CFR)?::**

Number of Copies of CFR::

Title:: FORTIFIED NUTMEG OIL PAIN RELIEF
FORMULATIONS

Attorney Docket Number:: 42397-192272

Request for Early Publication?:: YES

Request for Non-Publication?::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: YES

Latin Name::

Variety Denomination Name::

Petition Included?::

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.::

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship::	GRENADA
Country::	GRENADA
Status::	Full Capacity
Given Name::	Joel
Middle Name::	H.
Family Name::	WEBBE
Name Suffix::	
City of Residence::	St. Georges
State or Province of Residence::	
Country of Residence::	GRENADA
Street of Mailing Address::	P.O. Box 857 NCB House LB#115, Grand Anse
City of Mailing Address::	St. Georges
State or Province of Mailing Address::	
Country of Mailing Address::	GRENADA
Postal or Zip Code of Mailing Address::	

Applicant Authority Type::	Inventor
Primary Citizenship::	
Country::	
Status::	Full Capacity
Given Name::	Valentine
Middle Name::	
Family Name::	DUNCAN
Name Suffix::	
City of R sidence::	St. Georges
State or Provinc of R sid nce::	
Country of Residenc ::	GRENADA

Street of Mailing Address:: Spring's
City of Mailing Address:: St. Georges
State or Province of Mailing Address::
Country of Mailing Address:: GRENADA
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship:: GRENADA
Country:: GRENADA
Status:: Full Capacity
Given Name:: Vaughan
Middle Name::
Family Name:: FORSYTH
Name Suffix::

City of Residence:: St. Davids
State or Province of Residence::
Country of Residence:: GRENADA
Street of Mailing Address:: Perdmontemps
City of Mailing Address::
State or Province of Mailing Address:: St. Davids
Country of Mailing Address:: GRENADA
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor
Primary Citizenship:: GRENADA
Country:: GRENADA
Status:: Full Capacity
Given Name:: Leonard
Middle Nam ::

Family Nam :: ST. BERNARD

Nam Suffix::

City of Residence:: St. Georges

State or Province of Residence::

Country of Residence:: GRENADA

Street of Mailing Address:: Mt. Gay

City of Mailing Address:: St. George's

State or Province of Mailing Address::

Country of Mailing Address:: GRENADA

Postal or Zip Code of Mailing Address::

Correspondence Information

Correspondence Customer Number:: 26694

Phone Number:: 202-962-4072

Fax Number:: 202-962-8300

E-Mail Address:: magollin@venable.com

Representative Information

Representative Customer Number:: 26694

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		
	Continuation of		
	Continuation of		
	C ntinuation of		

For ign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: W & W Spices Grenada Ltd.
Street of Mailing Address:: NCB House LB#115, Grand Anse
City of Mailing Address:: St. Georges
State or Province of Mailing Address::
Country of Mailing Address:: GRENADA
Postal or Zip Code of Mailing Address::